										Application or Docket Number					
PATENT APPLICATION FEE DETERMINATION RECO Effective November 10, 1998									D .	9/615,383					
CLAIMS AS FILED - PART I									SMA	LE	NTITY		OTHE	R THAN	
(Cotumn 1) (Cotumn 2) FOR NUMBER FILED ANIMAGE SYTEM								7		E C		OR		LENTITY	
L			NOM	NUMBER FILED			NUMBER EXTRA			Ē	FEE		RATE	FEE	
BASIC FEE											380.00	OR		760.00	
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INDEPENDENT CLAIMS			<u> </u>	9 minus 3 =			٠ 6			\top		OR		468	
M	IULTIPLE DEPI	ENDEN	TCLAIM	PRESENT	•							┧ݖ゙	 	+	
* If the difference in column 1 is less than zero, enter *0* in column 2								ı	`			OR	<u> </u>		
•	· .								TOTA	١L		OR	TOTAL	1176	
1	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								SMAL	LEN	TITY	OR		R THAN ENTITY	
¥		C	LAIMS MAINING			HIGHEST NUMBER		1		_	DDI-	֓֞֞֞֞֜֞֞֜֞֜֞֜֞֜֞֜֞֟֜֞֟֜֞֟֞֜֞֟֜֞֟֜֟֜֟֝֟֜֟֜֟֝֟֟֜֟֟֜֟֟֜֟֟֝֟֜֟֜֟֜֟֜		ADDI-	
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	· .									¥	1.6	OR	<u>. </u>	e the disease.	
7								A	TOTAL DOT. FEE			OR 🗖	TOTAL DOIT, FEE		
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Ī	FIRST PRESE	NTATIO	N OF MU	LTIPLE DE	i	NT CLAIM	·	Ŀ	X =]	OR	X =		
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81	If the entry in column 1 is less than the entry in column 2, write "o" in column 3. If the "Righest Number Previously Paid For" IN THIS GPACE is less than 20, enter "20."											RL	TOTAL		
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